

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Make DC Listen		FEC IDENTIFICATION NUMBER ▼ C C00570739	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Make DC Listen		Date of Public Distribution/Dissemination MM / DD / YYYY 12 / 31 / 2015	
Mailing Address 824 S Milledge Ave Ste 101		Amount 284.00	
City Athens	State GA	Zip Code 30605	Transaction ID : E8C1E50289A3E4BCAB52
Purpose of Expenditure Donation Processing	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 12 / 31 / 2015	
Name of Federal Candidate Ted Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Make DC Listen		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 02 / 2016	
Mailing Address 824 S Milledge Ave Ste 101		Amount 8.00	
City Athens	State GA	Zip Code 30605	Transaction ID : EC32E974AD6C24B64968
Purpose of Expenditure Donation Processing	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 01 / 02 / 2016	
Name of Federal Candidate Ted Cruz		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	292.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Paul Kilgore

[Electronically Filed]

Date

MM / DD / YYYY
01 / 14 / 2016

Signature